Combined Declaration	For Patent	Application and	nd Power of Attorney				ATTORNEY DOCKET 81080CPK				
As below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
IMAGING ELEMENT CONTAINING A BLOCKED PHOTOGRAPHICALLY USEFUL COMPOUND											
The specification of which (check only one item below):											
X is attached hereto.											
was filed as United State was amended on (if app		erial No. on and									
was filed as PCT interna	tional application	Number on and w	as amended under PC	T Article 19 on	(if appli	cable).					
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.											
I acknowledge the duty to disclose 37. Code of Federal Regulations		nt & Trademark Offic	e all information known	to me to be mat	erial to p	atentability :	as define	d in Title			
37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign applications(s) for patent or inventor's certificate or any PCT international application(s) designating a least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed: PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:											
(PLICATION NUMBER	DATE OF FILE		F	RIORITY CLAIMED U	INDER 35 USC 6	119			
(# PCT, indicate PCT)	<u> </u>		(day month yea			YES		NO NO			
						YES		NO			
in k						YES		NO			
I hereby claim the benefit under Title 35, United States Code, 119 §(e) of any United States provisional application(s) listed below:											
PRIOR PROVISIONAL APPL		D ANY PRIORITY C	LAIMS UNDER 35 U.S				-				
PROVISIONAL APPUCATION NUMBER 60/207,509			FILING DATE 05/26/2000								
			03/23/2000								
I hereby claim the benefit under Title 35, United States Code, §120 of any prior United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior applications(s) in the manner provided by the first paragraph of Title 35, §112, I acknowledge the duty to disclose to the U.S. Patent & Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations §1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:											
PRIOR US APPLICATIONS C 35USC§120:	R PCT INTERN	ATIONAL APPLICA	TIONS DESIGNATING	THE U.S FOR	R BENE	FIT UNDER	!				
U.S. APPLICATIONS					STATUS (Check one)						
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PCT APPLICATIONS DESIGNATING THE U.S.											
PCT APPLICATION NO. PCT FILII		IG DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)								
								 			
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Combined Declaration For Patent Apply ation and Power of Attorney (Continued)

ATTORNEY DOCKET 81080CPK

POWER OF ATTORNEY: As a named inventor, I hereby appoint the attorney(s) and/or agent(s) associated with Eastman Kodak Company <u>Customer No. 01333</u> to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

91	nd Corresp	ondence to:	Stoff	Direct Telephone Calls to: (name and telephone number)
Patent Legal Staff Eastman Kodak Company 343 State Street Rochester, NY 14650-2201				Chris P. Konkol (716) 722-0452 FAX: (716) 477-1148
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	FULL NAME OF INVENTOR	FAMILY NAME Yang	FIRST GIVEN NAME Xiqiang	SECOND GIVEN NAME
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	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
, 🎚	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
1	BUSINESS ADDRESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
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2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME STATE OR FOREIGN COUNTRY	SECOND GIVEN NAME COUNTRY OF CITIZENSHIP
۰	RESIDENCE & CITIZENSHIP			
6	BUSINESS	BUSINESS ADDRESS	CITY	STATE & ZIP CODE (COUNTRY)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203	
højciel K. Slesand	higher yours	DH Lin	
DATE	DATE U	DATE T	
10-11-00	10-11-00	10/12/2000	
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206	
DATE	DATE	DATE	